

## Division of Health Service Regulation

STATEMENT OF DEFICIENCIES  
AND PLAN OF CORRECTION(X1) PROVIDER/SUPPLIER/CLIA  
IDENTIFICATION NUMBER:

HAL074011

(X2) MULTIPLE CONSTRUCTION

A. BUILDING: 01

B. WING: \_\_\_\_\_

(X3) DATE SURVEY  
COMPLETED

11/18/2015

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

BROOKDALE DICKINSON AVENUE

2715 DICKINSON AVENUE  
GREENVILLE, NC 27834

| (X4) ID<br>PREFIX<br>TAG | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)   | ID<br>PREFIX<br>TAG | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE |
|--------------------------|--|---------------------|--|--------------------------|
| C 000                    | Initial Comments<br><br>Report of a Biennial Construction Survey by<br>Frank Strickland and Greg Cates on 11/18/2015:<br><br>Based on information gathered from the DHSR<br>database, this facility was licensed for licensure<br>on 10/13/1997 for Seventy-Six (76) Beds,<br>including Twenty-Four (24) Special Care (SCU)<br>Beds. Based on this information, we are requiring<br>the facility to meet the 1996 Homes for the Aged<br>and Disabled - Minimum Standards and<br>Regulations, the applicable portions of the 2005<br>Rules for Adult Care Homes of seven or more<br>beds, and the 1996 Edition of the North Carolina<br>State Building Code, Section 409.1, Group I<br>Unrestrained Occupancy.<br><br>Deficiencies have been cited and a Plan of<br>Correction is required. | C 000               |  |                          |
| C 138                    | Bathrooms--Must Be Mechanically Ventilated<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL<br>ENVIRONMENT<br>(e) The requirements for bathrooms and toilet<br>rooms are:<br>(11) Toilets and baths shall be well lighted and<br>mechanically ventilated at two cubic feet per<br>minute. The mechanical ventilation requirement<br>does not apply to facilities licensed before April 1,<br>1984, with natural ventilation;<br><br>This Rule is not met as evidenced by:<br>1-Based on Observation, the facility failed to<br>provide an environment in accordance with this<br>Rule by not providing ventilation where odors are<br>generated. This could affect residents and staff<br>by subjecting them to house-keeping odors.                                   | C 138               |  |                          |

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*W. Barker*

TITLE

*Executive Director*

(X6) DATE

1/11/16

STATE FORM

6889

GN3421

If continuation sheet 1 of 8

## Division of Health Service Regulation

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| C 136                    | Continued From page 1<br><br>Findings on 11/18/2015:<br>The mechanical ventilation is not operational<br>located at the following locations:<br>(a) Room 308 Resident Bathroom<br>(b) Spa Bathroom SCU<br>(c) Resident Room Bathrooms SCU   | C 136               | REPLACED BELTS THAT WERE<br>CRACKED-TORN ABOVE THE ROOF ON 12/7/15<br>& CHECKED VENTILATION IS PULLING   |                          |
| C 164                    | Housekeeping and Furnishings-Clean, Repaired<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0306 HOUSEKEEPING AND<br>FURNISHINGS<br>(a) Adult care homes shall:<br>(1) have walls, ceilings, and floors or floor<br>coverings kept clean and in good repair;<br>(2) have no chronic unpleasant odors;<br>(3) have furniture clean and in good repair;<br>(e) This Rule shall apply to new and existing<br>facilities.<br><br>This Rule is not met as evidenced by:<br>1-Based on observation, the facility has not<br>maintained and serviced the HVAC supply and<br>return air grilles. This will effect all residents and<br>staff.<br><br>Findings on 11/18/2015:<br>The exhaust grilles have excessive particulate<br>build-up in all of the facility bathrooms.<br><br>2-Based on observation, the facility has not<br>maintained the interior and exterior finishes of<br>outdoor living spaces. This will effect all<br>residents and staff.<br><br>Findings on 11/18/2015:<br>The exterior Porch located in the 100 Hall have<br>the following construction issues:<br>(a) The exterior bug screen is torn. | C 164               | THE GRILLES WERE TAKEN DOWN<br>AND VACUUMED OUT 12/7/15<br><br><br><br><br><br><br><br><br><br>THE SCREEN HAS BEEN REPAIRED<br>IN SOME AREAS COMPLETION WILL<br>BE FINISHED WHEN THE WEATHER PERMITS<br>WILL COMPLETE SCREEN REPLACEMENT |                          |

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| C 184                    | Continued From page 2<br>(b) Excessive stored materials<br><br>3-Based on observation, the facility has not maintained and serviced of plumbing fixtures. This will effect all residents and staff.<br><br>Findings on 11/18/2015:<br>The sink faucet is heavily rusted at the base and leaking located in Room 402.<br><br>4-Based on observations, the facility has not maintained the exterior building components. This will effect all residents and staff.<br><br>Findings on 11/18/2015:<br>The exterior components have the following deficiencies:<br>(a) All of the exterior wood trim and door frame is rotten for the Exit Hall door adjacent to Room 206.<br>(b) Siding has large holes that would allow water migration that is located at the gable end adjacent to Room 206.<br>(c) The double Patio Doors are rotten on the exterior finish faces. | C 184               | MATERIAL WAS REMOVED<br>AND PUT INTO STORAGE FROM 100 HALL<br>DONE 11/23/15<br><br>SINK HAS BEEN CLEAN AND REPAIRED<br>REPAIRED ON 11/23/15<br><br>The HOLES ON THE VINYL SIDING<br>WILL BE REPLACED BY 1/30/2016<br>The DOOR TRIM WILL BE REPLACED<br>BY 1/31/2016<br>The VINYL WILL BE REPAIRED<br>BY 1/31/2016 |                          |
| C 186                    | Housekeeping-Maintained Free of Hazards<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0306 HOUSEKEEPING AND<br>FURNISHINGS<br>(a) Adult care homes shall:<br>(5) be maintained in an uncluttered, clean and<br>orderly manner, free of all obstructions and<br>hazards;<br>(e) This Rule shall apply to new and existing<br>facilities.<br><br>This Rule is not met as evidenced by:   | C 186               |   |                          |

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C 168 Continued From page 3

1-Based on observation, the facility has not maintained and service of floor surfaces and finishes. This will effect all residents and staff by creating trip hazards.

Findings on 11/18/2015:

The floor finishes and surfaces are damaged and in disrepair located at the following locations:

(a) Employee Locker Room

(b) 100 Hall Laundry Room

(c) Laundry Room in 400 Hall (Floor surfaces around washing machine)

(d) Exit Vestibule adjacent to Room 403

(e) Exit Vestibule adjacent to Room 412

C 168

PAINTING BREAKROOM FLOOR SCHED FOR JAN 31, 2016  
 THE FLOOR WAS CLEANED 11/18/2015  
 THE FLOOR WILL BE REPAIRED JAN 31, 2016  
 THE FLOOR WILL BE REPAIRED JAN 31, 2016  
 FLOORING WAS PUTTED UP AND CLEANED 11/18/2015  
 FLOOR WAS CLEANED 11/18/15

C 189 Building Equipment Maintained Safe, Operating

SECTION .0300 - PHYSICAL PLANT  
 10A NCAC 13F .0311 OTHER  
 REQUIREMENTS

(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.

(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.

This Rule is not met as evidenced by:

1-Based on observation, the facility was not maintained in a safe manner due to breaches of the one-hour roof/ceiling assembly construction that has invalidated its integrity. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin.

Findings on 11/18/2015:

C 189

PRINTED: 12/28/2015  
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| C 189                    | Continued From page 4  | C 189               | <p>The ceiling sheet-rock is unfinished at butt-joints and not maintained at the following locations:</p> <p>(a) Hall outside the Bathroom for Room 106</p> <p>(b) Parlor in the 200 Hall</p> <p>2-Based on observation, the facility was not maintained in a safe manner due to breaches in the one-hour roof/ceiling assembly construction that has invalidated its integrity. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 11/18/2015:</p> <p>There are dropped sprinkler head escutcheons located at the following locations:</p> <p>(a) Outside Porch located in the 100 Hall</p> <p>(b) Room 206</p> <p>3-Based on observations, the facility has not maintained the plumbing piping in a safe manner by not complying with the North Carolina Plumbing Code. This may affect all residents, staff and facility guests.</p> <p>Findings on 11/18/2015:</p> <p>The Kitchen ice machine drain line is only 3/4 inch above the floor drain and a minimum 2 inch clearance is required.</p> <p>4-Based on observation, the facility was not maintained in a safe manner due to breaches of the smoke barrier exit corridor construction that has invalidated its integrity. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 11/18/2015:</p> <p>The resident entry doors have 3/8" gaps at the</p> | <p>Patched &amp; SPRAYED POPCORN ON 10/18/2015 IN ROOM 106</p> <p>Patched &amp; SPRAYED POPCORN ON 10/18/2015 IN 200 PARLOR</p> <p>Pushed up covers 11/18/15 &amp; ADJUSTED FROM THE ATTIC</p> <p>Pushed up covers 11/18/15</p> <p>ADJUSTED THE LEGS ON THE ICE MACHINE TO BRING THE HEIGHT UP TO 2" FROM THE FLOOR DONE ON 11/19/2015</p> |

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| C 189                    | Continued From page 5<br><br>hinged side at the top of the door jambs that<br>can not resist the passage of smoke located at<br>the following locations:<br>(a) Room 302<br>(b) Room 303<br>(c) Room 305<br>(d) Room 308<br><br>5-Based on observations, the facility has not<br>maintained the plumbing fixtures in a safe<br>manner. This will affect all residents, staff and<br>facility guests.<br><br>Findings on 11/18/2015:<br>The toilets are not secured to the floor at the<br>bases and there is leakage and slippery floors at<br>the following locations:<br>(a) Men's Guest Bathroom in 100 Hall<br>(b) Women's Guest Bathroom in 200 Hall<br><br>6-Based on observation, the facility was not<br>maintained in a safe manner due to breaches of<br>the one-hour roof/ceiling assembly construction<br>that has invalidated its integrity. This could affect<br>all residents and staff in the event that fire and/or<br>smoke is not contained in a room or compartment<br>of origin.<br><br>Findings on 11/18/2016:<br>The ceiling sheet-rock has unfinished at<br>butt-joints and not maintained at the following<br>locations:<br>(a) Hall outside the Bathroom for Room 108<br>(b) Parlor in the 200 Hall | C 189               | ALL DOORS HAVE BEEN FIXED TO RESIST<br>302, 303, 305 & 308 THE PASSAGE OF SMOKE<br>DONE ON 12/7/15<br><br>REMOVED THE TOILET & REPAIRED THE FLANGE<br>ON 12/7/15 ON MEN'S ROOM & REPAIRED WAX RINGS<br>TIGHTENED DOWN BOWLS IN LADIES ROOM 11/18/2015<br>& REPAIRED THE LEAKS<br><br>PATCHED & SPRAYED POPCORN ON 12/18/2015 IN 100<br>PATCHED & SPRAYED POPCORN ON 12/18/2015 IN 200 HALL<br>PARLOR |                          |

Division of Health Service Regulation

STATE FORM

8899

GN3421

If continuation sheet 6 of 6